SECRETARY OF STATE STATE CAPITOL 500 E. CAPITOL AVE. PIERRE, S.D. 57501 (605)773-4845 Fax (605)773-4550

STATEMENT OF CANCELLATION OF REDEEMABLE SHARES

FILING FEE: \$50

Pursuant to the provisions of SDCL 47-3-51, the undersigned	l corporation files the follow	ing Statement of Cancellation of Red	eemable Shares:
1. The name of the corporation	is		
2. The number of redeemable s	hares canceled through reden	nption or purchase, itemized by class	and series:
Number:	Class:	Series:	
3. The aggregate number of iss	ued shares, itemized by classe	es and series, after giving effect to su	ch cancellation:
Number:	Class:	Series:	
4. The amount expressed in dol \$	lars, of the stated capital of the	he corporation after giving effect to s	uch cancellation is
		hares shall not be reissued, then the n esses and series, after giving effect to	
To be signed in the presence of president or any other officer.	a notary public by either the	chairman of the board of directors, o	r by the
Dated		(Signature)	
STATE OFCOUNTY OF		(Title)	
I,20, per by me first duly sworn, declared the	, a notary public, do herel sonally appeared before me at he/she is the, that he/s	by certify that on this day of of the signed the foregoing document as offi	
My Commission Expires		(Notary Public)	
Notarial Seal			